ucc financing statement Doc 65-2 File

FOLLOW INSTRUCTIONS

d 06/06/23 16:13:55 Desc Exhibit

A. NAME & PHONE OF CONTACT AT FILER (optional) XL Funding, LLC 3176897925	
B. E-MAIL CONTACT AT FILER (optional)	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) XL Funding, LLC 10333 N. Meridian St.	
Suite 200 Indianapolis, IN 46290 USA	

FILING NUMBER: 22-0009750631 FILING DATE: 02/25/2022 12:17 PM **DOCUMENT NUMBER:** 1123910120002 **FILED: Texas Secretary of State**

IMAGE GENERATED ELECTRONICALLY FOR WEB FILING

	5A	THE ABOV	E SPACE IS	S FOR FILING OFFICE	USE ONLY
1. DEB	TOR'S NAME - Provide only one Debtor name (1a o	or 1b) (use exact, full name; do not omit, modify, or abbre	eviate any part	t of the Debtor's name); if a	ny part of the Individual
Debtor UCC1A	·	c, check here and provide the Individual Debtor inform	nation in item	10 of the Financing Stateme	ent Addendum (Form
	1a. ORGANIZATION'S NAME			***********************************	
OR	DFW Boat Specialists, Limited	l Liability Company			
OK	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
1c. MA	ILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
240 106	1 WORTHINGTON DR. STE	DENTON	TX	76207	USA
1	TOR'S NAME - Provide only one Debter name (2a)	or 2b) (use exact, full name; do not omit, modify, or abbre	viate any nad	t of the Debtor's name): if a	ny part of the Individual
	s name will not fit in line 2b, leave all of item 2 blank d)	c, check here Cand provide the Individual Debtor inform			
	2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
2c. MA	ILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. SEC	URED PARTY'S NAME (or NAME of ASSIGNEE of	ASSIGNOR SECURED PARTY) - Provide only one Sec	ured Party na	me (3a or 3b)	
	3a. ORGANIZATION'S NAME		***************************************		
	XL FUNDING, LLC				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
		to the state of th			
1	iling address 33 N. MERIDIAN ST.	CITY INDIANAPOLIS	STATE IN	POSTAL CODE 46290	COUNTRY USA
All Inv specif or acq Proce vehicle Deale specif and of impler withou any ar to the any ar conne forfeit any Poto the nonco	LATERAL: This financing statement covers the folloentory, whether now existing or acquired and cally including, without limitation, Purchase M uired, and all additions, accessions, accessoreds, together with any and all books and record parts, Fixtures, Goods and all other tangible of every kind or nature, whether now owned cally including, without limitation, all machines of the road vehicles, forklifts, tools, dies, jigs, panents, improvements, accessories, attachments, systems, carpeting, draperies and apparaducts and proceeds of each of the foregoing, to limitation: and all proceeds of any insurance, indemnity, we deally proceeds of any form made or due and cition with any requisition, confiscation, condeure of all or any part of the foregoing by any Gerson acting under color of Governmental Autextent of the value of Collateral, claims arising formity, or interference with the use of, defeat	wherever located, loney Inventory now owned ries, replacements, and rds; All Equipment, vehicles, personal property of the or acquired, wherever located, ry, trucks, boats, on resses, appliances, hts, parts, components, atus; specifically including, varranty or guaranty payable payable to the Dealer in mnation, seizure or lovernmental Authority or hority, g out of the loss, ets or infringement of	a administerec	I by a Decedent's Personal	Representative
6a. Ch	conly ir applicable and check <u>only</u> one box: Collateral is Lieck <u>only</u> one box: lic-Finance Transaction Manufactured-Home Tr		6b. Check	only if applicable and check rural Lien Non-UCC Filin	only one box.
Service and the service and th		see/Lessor Consignee/Consignor Seller/Buye	Bailee/E	Bailor Licensee/Licens	ЮГ
8. OPT	IONAL FILER REFERENCE DATA:				

page	2 Case 23-40316 Do	c 65-2 Filed 06/06/23 B Pag	Entered ge 2 of 2	06/06/2	3 16:13:55 De	sc Exhibit
	INANCING STATEMENT ADDENDUM DW INSTRUCTIONS					
	IE OF FIRST DEBTOR: Same as line 1a or 1 ecause Individual Debtor name did not fit, che	terminal ter	s left		ня того поста с втого постя с втого по тяся в того поста с втого поста с втого по тяся в того	ADDRESS RESERVED BETTER DE TERRESSE DE
OR I	a. ORGANIZATION'S NAME DFW Boat Specialists, Limited Liabili b. INDIVIDUAL'S SURNAME	ty Company	THE STATE OF THE S			
F	IRST PERSONAL NAME	***************************************				
م	NDDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE AI	BOVE SPAC	E IS FOR FILING OFFICE	USE ONLY
	BTOR'S NAME: Provide (10a or 10b) only <u>one</u> lo not omit, modify, or abbreviate any part of t 10a. ORGANIZATION'S NAME				of the Financing Statement	(Form UCC1) (use exact, full
	10b. INDIVIDUAL'S SURNAME	***************************************				
	INDIVIDUAL'S FIRST PERSONAL NAME					
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITI	AL(S)				SUFFIX
10c. MA	IILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
OR 11c. MA	ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME SILLING ADDRESS DITIONAL SPACE FOR ITEM 4 (Collateral)	FIRST PERSONAL NAI			AL NAME(S)/INITIAL(S) POSTAL CODE	SUFFIX
any an foregoi All rene accretic tools, a placed	n, or damage to, the Collateral, any Stod dall other amounts paid or payable und ng, whether or not in lieu the foregoing; ewals, extensions, replacements, modifions, accessions, betterments, substitutiocessories, parts and the like now in, at in or added to any Collateral, whether otts, remedies, claims and demands undeng.	ler or in connection with any of the cations, additions, improvements, ons, replacements, annexations, ttached to or which may be or not of like kind; and er or in connection with each of the				
recorde 15. Nam	This FINANCING STATEMENT is to be filed [i d) in the REAL ESTATE RECORDS (if applic ne and address of a RECORD OWNER of rea ed in item 16 (if Debtor does not have a record	able) Lovers timber to be al estate 16. Description of real e	cut Covers as-e	xtracted colla	ateral Cis filed as a fixture	filing

17. MISCELLANEOUS: